

State of Hawaii
Department of Human Services
Benefits, Employment and Support Services Division
Employment and Training Program Office

Addendum #1

December 3, 2010

To

Request for Proposals

HMS 903-11-01-S
Temporary Assistance for Needy Families (TANF)
Maintenance of Effort (MOE) Services Statewide
November 15, 2010

December 3, 2010

ADDENDUM NO. 1

To

REQUEST FOR PROPOSALS

HMS 903-11-01-S

**Temporary Assistance for Needy Families (TANF) Maintenance of Effort (MOE)
Services Statewide**

The Department of Human Services, Benefit, Employment and Support Services Division, Employment and Training Program Office is issuing this addendum to HMS 903-11-01-S, Temporary Assistance for Needy Families (TANF) Maintenance of Effort (MOE) Services Statewide for the purposes of:

- ☐ Responding to questions that arose at the orientation meeting of <Date> and written questions subsequently submitted in accordance with Section 1-V, of the RFP.
- ☒ Amending the RFP.
- ☐ Final Revised Proposals

The proposal submittal deadline:

- ☐ is amended to <new date>.
- ☒ is not amended.
- ☐ for Final Revised Proposals is <date>.

Attached is (are):

- ☐ A summary of the questions raised and responses for purposes of clarification of the RFP requirements.
- ☒ Amendments to the RFP.
- ☐ Details of the request for final revised proposals.

If you have any questions, contact:

Gwen Murashige, Program Specialist, 808-586-7110, gmurashige@dhs.hawaii.gov
Ginet Hayes, Program Specialist, 808-586-7088, ghayes@dhs.hawaii.gov
Department of Human Services, BESSD/ETPO

820 Mililani Street, Suite 606
Honolulu, HI 96813

HMS 903-11-01-S, Temporary Assistance for Needy Families (TANF) Maintenance of Effort (MOE) Services Statewide is amended as follows:

Subsection Page

Section 1, Administrative Overview

No changes

Section 2, Service Specifications

I (F) 2-2

Funding for this procurement is TANF funds, Catalog of Federal Domestic Assistance (CFDA) # 93.558. Total funding is \$2,250,000.00 for a 9 month period, effective March 1, 2011, and for a possible additional three (3) twelve-month extensions at \$3,000,000.00 per extension subject to availability of funds and compliance with provider performance (as defined in Section III). Initial term of contract: March 1, 2011 to December 31, 2011

II. (E) 2-3

Number of possible extensions: 3
Maximum length of each extension: 1 year
Conditions for extension: Must be in writing and executed prior to expiration. Awardee must be in compliance with performance requirements as defined in Section III.

III. (A) 2-4

Note: Actual awarded funding for continued extensions shall remain at the initial awarded funding amount provided that MOE expenditures contributed is unchanged. An increase in MOE expenditures contributed will not change award amount, however, a decrease greater than five (5) percent from the MOE expenditures used to determine the initial award amount will subject the actual awarded funding to re-evaluation using the 3 bulleted criteria stated on this page.

- III. (B)(8) 2-13 8. MOE Expenditure Report
The organization shall provide their
MOE Expenditure Report annually and
submit the report no later than
November 15 of each calendar year for
the preceding federal fiscal year period
(October 1 through September 30).

Section 3, Proposal Application Instructions

No changes

Section 4, Proposal Evaluation

No Changes

Section 5, Attachments

See
attached
copies

- TANF Maintenance of Effort (MOE Expenditure Report
- Memorandum of Agreement



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

BENEFIT, EMPLOYMENT AND SUPPORT
SERVICES DIVISION

TANF Maintenance of Effort (MOE) Expenditure Report

1. Name of Organization:	2. Program Description:
3. Address:	

4. Categories:	5. Expenditures: Year to Date For FFY: 2010 (Oct 2009 - Sept 2010)
Direct Services	
Administrative Costs	
Value of donated goods	
Total	

6. Volunteer Hours (see instructions)	Hours	Hourly Rate
a. Volunteer Hours for Volunteers Serving in Positions Directly Comparable to Paid Positions in Your Organization:		
1		
2		
3		
Providing Services For Which Your Organization Has No Comparable Paid Position)		\$20.85

7. Total Number of Clients Served During the FFY:
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8. Comments:

9. Certification:

I Certify to the best of my knowledge and belief that expenditures and volunteer hours reported meet the requirements of one or more of the following four TANF purposes:

1. Provide assistance to needy families so that the children may be cared for in their homes or in the homes of relatives;
2. End the dependency of needy parents on government benefits by promoting job preparation, work, and marriage;
3. Prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies; and
4. Encourage the formation and maintenance of two-parent families.

I further certify that the service or benefit this program provides is:

1. Not using any of the expenditures reported above to match or leverage federal funds; and
2. None of the expenditure described above are federal funds.

These expenditures must be adjusted to reflect portion of expenditures providing services to families with children age 18 and under.

☐ Yes ☐ No

These expenditures must be adjusted to reflect portion of expenditure providing services to families below 600% Federal Poverty Line (FPL).

☐ Yes ☐ No

No adjustment needed because we serve only families with children age 18 or under and below 600% of FPL.

10. Signature

Title

Date Reported

For Department of Human Services use only

Reviewed By: _____ (Signature - Program Specialist) Date _____

Reviewed By: _____ (Signature - Program Specialist) Date _____

MEMORANDUM OF AGREEMENT
(Temporary Assistance for Needy Families Program)
BETWEEN
(AGENCY)
AND THE
DEPARTMENT OF HUMAN SERVICES OF THE STATE OF HAWAII

1. DATE OF THIS AGREEMENT

2. PARTIES AND COMMUNICATIONS

The parties to this Memorandum and contact persons are set forth below. All communications regarding this Memorandum are between such contact persons.

Party:	Department of Human Services of the State of Hawaii	(Agency)
Address:	Liliuokalani Building 1390 Miller Street	
City, State Zip	Honolulu, Hawaii 96813	(city), Hawaii
Contact		
Title:	Director	
Tel. No.	(808) 586-4997	
FAX No.:	(808) 586-4890	
E-Mail:		

3. DEFINITIONS

(Agency) means a Hawaii nonprofit corporation.

DHS or State means the Department of Human Services of the State of Hawaii or the State of Hawaii.

MOE means "Maintenance of Effort" as such term is used and defined under the TANF Program.

TANF Program means the Temporary Assistance for Needy Families Program which is a federal program that DHS administers for the State of Hawaii.

TANF MOE means cash or in-kind expenditures that the State provides or is deemed to provide toward achieving the TANF goals in Hawaii.

4. RECITALS

- A. The goals of the TANF Program include:
- assisting needy families so that children can be cared for in their own homes;
 - reducing the dependency of needy parents by promoting job preparation, work and marriage;
 - preventing out-of-wedlock pregnancies; and
 - encouraging the formation and maintenance of two-parent families
- B. As a condition of receiving TANF Program funding, the State, by DHS, must meet and document a specified level of MOE expenditures.
- C. Pursuant to Policy Announcement TANF-ACF-PA-2004-01, the State may count cash and in-kind contributions which third parties in Hawaii receive and expend for health and human services programs that are consistent with TANF Program goals as part of the TANF MOE expenditures. State represents to (Agency) that counting such cash and in-kind contributions which third parties in Hawaii receive and expend for health and human services programs that are consistent with TANF Program goals toward TANF MOE expenditures is allowed by Policy Announcement TANF-ACF-PA-2004-01.
- D. (Agency) is a Hawaii nonprofit corporation whose activities include participating and encouraging community efforts to address social problems, such as homelessness, economic self sufficiency, crime and drug prevention and early childhood development.
- E. DHS has requested (Agency) to assist DHS with compiling data about funds and in-kind contributions which (Agency) receives and expends for health and human services programs that are consistent with TANF goals but only to the extent that such information is available to the public and is not otherwise confidential.
- F. (Agency) is willing to use reasonable efforts to assist DHS provided that (Agency) shall not have any liability to the State, Federal government/TANF Program or anyone else arising out of or in connection with the data that is collected and provided hereby.

5. MEMORANDUM OF AGREEMENT

- A. Generally. DHS and (Agency) agree to identify services and programs which would qualify as TANF MOE and compile data about the amount of cash and value of in-kind contributions which (Agency) receives and expends for such programs provided that such data is available

to the general public or is voluntarily provided and can be readily documented for purposes of compliance with TANF regulations. (Agency) will compile such data in a form and format prescribed by DHS.

- B. Limited Use and Purpose of Data. Such data will be used solely for the purpose of enabling the State to meet the State's TANF MOE obligations.
- C. Confidentiality. DHS/State will respect the privacy and confidentiality of all data provided and report such data to the Federal government only in an aggregate form. No data on any individuals will be published or made available to the public by DHS/State.
- D. No Warranty of Accuracy. As a material consideration to induce (Agency) to enter into this Memorandum, DHS/State agrees as follows:
- (1) (Agency) does not make any express or implied representation or warranty with respect to whether any data compiled and/or provided is complete or accurate.
 - (2) (Agency) shall not be liable to DHS/State, TANF Program/Federal government or anyone else for any damages, sanctions or other relief of whatever kind or nature if any data compiled and/or provided in whole or in part by (Agency) shall not be complete or accurate.
- DHS/State may request (Agency) to provide DHS/State with supporting data in a single state or Federal audit provided that such participation does not unreasonably interfere with the responsibilities and prior commitments of the (Agency) employee(s) whom (Agency) has assigned the performance of the subject of this Agreement and (Agency) shall not be responsible for or required to contribute to the cost of any such audit.
- E. No Endorsement. By entering into this Memorandum, (Agency) is not endorsing any particular TANF program or activity sponsored by DHS/State.
- F. Termination. Either party may terminate this Memorandum by providing written notice to the other party no less than thirty (30) days prior to the desired termination date.
- G. Counterparts. This Memorandum may be executed in counterparts.

[The remainder of this page is blank. The next page is a signature page.]

**Memorandum of Agreement
(Temporary Assistance for Need Families Program)
Department of Human Services of the State of Hawaii and
(Agency)**

(Agency)

**Department of Human Services of the State
of Hawaii**

By: _____

Name

Title:

By: _____

Title: Director